



City of Miami Gardens

Building Services Division
18605 NW 27TH AVE
Miami Gardens, Florida 33056
305-622-8027 (office) 305-626-4220 (fax)
www.miamigardens-fl.gov

PERMIT EXTENSION REQUEST

Date: ____/____/____

Re: Extension of Permit Number _____

ONLY ONE (1) EXTENSION IS ALLOWED BY THE BUILDING OFFICIAL. A BOARD OF RULES AND APPEALS APPROVAL REQUIRED BEYOND THE FIRST EXTENSION.

To whom it may concern:

This letter is to request an 90 day extension on the above referenced permit number for the following reasons:

Sincerely:

(Signature of Qualifier, Owner-Builder or Owner-Builder's Agent)

STATE OF FLORIDA

COUNTY OF MIAMI DADE

Sworn to and subscribe before me this ____ day of _____, 20__ by:

Printed Name of Signer

[] Personally known to me [] or Produced Identification

Type of Identification: _____

[] Did take Oath [] Did not take Oath

Signature of Notary Public

FOR OFFICE USE ONLY

Approved By: _____

Reviewed By: _____

Permit Issued Date: _____

Permit Date: _____

Last Inspection Date: _____

Jobsite Address: _____